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# A GUIDE TO K-12 PROGRAM DEVELOPMENT IN PHYSICAL EDUCATION

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#### **PREFACE**

As we move into the 21st century, it is time to change some of the public's perceptions about physical education; not "athletics", not "gym", but the sequential educational program that teaches the how, what and why of physical education. Physical education does not look like what many parents and teachers participated in when they were children: lines of students in matching uniforms counting aloud as they did calisthenics. Students and the school environment have changed, and they have changed greatly. Research has continued to increase awareness about the need for and purpose of physical activity and its relationship to one's overall health. National initiatives have brought physical education to the forefront rather than an isolated "extra" or "special". Issues such as inclusion, interdisciplinary curriculums and Title IX have influenced programming considerations. With public interest in education running high, physical educators need to focus on planning and teaching short- and long-term decision making and about what students should know and be able to do in physical education.

An investment in health and fitness is just what this country needs right now! We have to encourage every person to take responsibility for his or her own life and that begins with prevention. So that we don't have another generation of couch potatoes, our young people also need to experience a personal sense of pride about learning new skills and respect for their own bodies (Donna Shalala, Secretary of Health and Human Services).

This *Guide to K-12 Program Development in Physical Education* creates high-quality standards for all students in physical education and provides local school districts with direction for developing and delivering quality programs for the students of Connecticut. The intent is to stimuate change and enhance not just curriculum, but all entities which affect quality programming. This is demonstrated in the chapters of the guide which address a variety of topics that include the support and need for increased physical activity, the elements needed to deliver a quality program in physical education and the critical issues that must be considered when planning and developing programs. It is a pleasure to be able to provide you with this guide, a valuable resource as we work together to enhance curriculum, instruction and student achievement.

Barbara Westwater Consultant in Physical Education

#### **ACKNOWLEDGMENTS**

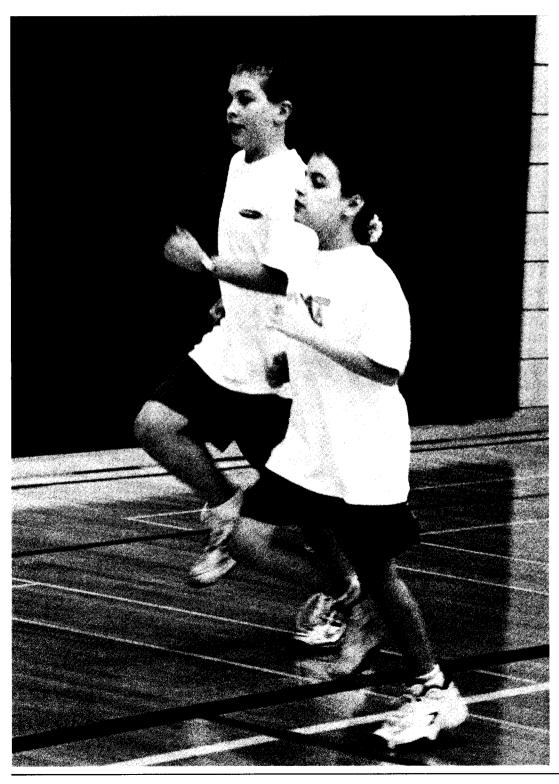
This guide to K-12 program development has become a reality through the hard work, dedication and guidance of many individuals whose contributions may not be acknowledged here, but whose efforts are greatly appreciated. Without the help and concern of these outstanding educators, administrators and mentors, this guide would not have been possible.

The following served as members of the Physical Education Curriculum Committee:

- Amy Beardsley, physical educator, Salem Elementary School;
- June Bernabucci, physical education chairperson, Hartford;
- Judith Bourell Miller, associate professor, Central Connecticut State University;
- Pamela Goodpastor, chairperson, Health and Physical Education Department, Regional School District 9;
- Vincent Iezzi, health and physical education director, Hamden;
- JoAnn Knapp, health and physical education director, South Windsor;
- Ed Manfredi, physical educator, Chippens Hill Middle School, Bristol;
- Jean Mee, physical educator, Stratford Academy, and assistant professor, Southern Connecticut State University;
- Victoria Morley, assistant professor, Central Connecticut State University;
- William Phelps, physical educator, Canton Elementary School;
- Robert Pierce, physical educator, Plainville High School; and
- Diane Wright, physical educator, Prince School, New Haven.

Recognition is also given to the physical educators from the original Healthy Schools 2000 Program, who began some of the framework for this project; the many teachers who have contributed ideas for illustrative tasks and assessments; and both the Connecticut Association for Health, Physical Education, Recreation and Dance and the Connecticut Association of Administrators for Health and Physical Education for their ongoing support and advocacy for the development of quality programs in physical education in Connecticut schools.

The Need For Physical Activity And Physical Education The Role Of Physical Education In Schools Purpose Of The Guide



## The Need For Physical Activity And Physical Education

Our society has become increasingly more aware of the benefits and values of physical activity.

Regular physical activity in childhood and adolescence can help control weight and reduce fat, build healthy bones and muscles, and improve cardiorespiratory endurance and muscle strength. By regularly participating in physical activity, young people can develop lifelong habits that can reduce their risk of dying prematurely, dying of heart disease, and developing diabetes, high blood pressure and colon cancer.

(Centers For Disease Control and Prevention, 1997)

Research, theory and practical experience have given us both an understanding and the evidence to support the need for quality programs in physical education that will give children the knowledge, skills and attitudes needed to develop an active and healthy lifestyle. Modern technology, with its labor-saving devices, motorized transportation and passive entertainment, has resulted in an inactive and sedentary lifestyle for many Americans. This has occurred in all age groups, from our children to our senior citizens. Lifelong health practices begin in early childhood. Their development and maintenance cannot be left to chance. Effective physical education programs must be an integral part of every child's formal educational experiences so that each child develops basic physical skills, positive attitudes and habits of exercise and activity.

An increasing number of studies have heightened our awareness and understanding about the benefits of physical activity. Beginning with the Health and Human Services document Healthy People 2000, physical activity and fitness were cited with two major goals: "to increase moderate daily physical activity and reduce sedentary lifestyles" (U.S. Department of Health and Human Services, 1990). In 1992, the American Heart Association placed physical inactivity, or lack of exercise, on its list as the fourth risk factor for coronary heart disease. In July 1996, the U.S. Surgeon General released a report on physical activity and health. It states, "The expanding and strengthening evidence on the relationship between physical activity and health necessitates the focus this report brings to this important public health challenge."

Specific conclusions made in the report are as follows:

- Nearly half of American youths 12-21 years of age are not physically active on a regular basis. Moreover, physical activity declines dramatically during adolescence.
- Daily enrollment in physical education classes has declined among high school students from 42 percent in 1991 to 25 percent in 1995.
- Nineteen percent of all high school students are physically active for 20 minutes or more in physical education classes every day during the school week.

Ideas from *Physical Activity and Health: A Report of the Surgeon General* (1996) for improving the amount of physical activity in the daily lives of children include "well-designed programs in schools to increase physical activity in physical education classes." The Surgeon General's report supports the overarching goal of Connecticut's physical education programs. By the end of 12th grade, students will recognize the importance of and choose to participate regularly in physical activities designed to maintain and enhance healthy lifestyles. Children must be taught the skills, knowledge, attitudes and behaviors that lead to regular and enjoyable participation in physical activity.

The Centers for Disease Control (CDC), in March 1997, published *Guidelines for School and Community Programs to Promote Lifelong Physical Activity*. The guidelines were cooperatively developed as the fourth set in a series focusing on the preventable causes of death. The CDC guidelines and this curriculum guide are designed to assist in the development and implementation of quality physical activity initiatives for young people and to educate policy makers and the public about the importance of such initiatives. Ten recommendations are provided in the CDC document, including the following for physical education curriculums and instruction:

Implement sequential physical education curriculums and instruction in Grades K-12 that:

- emphasize enjoyable participation in lifetime physical activity, such as walking and dancing, not just competitive sports;
- help students develop the knowledge, attitudes and skills they need to adopt and maintain a physically active lifestyle;
- follow the National Standards for Physical Education; and
- keep students active for most of class time.

Physical education class is not the only opportunity to help young people establish habits that will allow them to build and maintain a healthy lifestyle. Everyone can make a difference; the CDC gives recommendations for parents, students, teachers, coaches, school administrators, school board members, and community sports and recreation program coordinators.

Proactive steps have been taken by the federal government to support physical education in our schools. This was demonstrated in the Concurrent Resolution of the U.S. House of Representatives and the U.S. Senate in the 1st Session, 100th Congress, 1987.

Now, therefore, be it Resolved by the House of Representatives and Senate (concurring), That the Congress encourages state and local governments and local educational agencies to provide quality daily physical education programs for all children in kindergarten through Grade 12.

(The entire resolution may be found in Appendix A)

In 1994 the Goals 2000: Educate America Act enacted by the U.S. Congress, included physical education in the objectives of "Goal 3: Student Achievement and Citizenship":

All students will have access to physical education and health education to ensure they are healthy and fit.

The Connecticut State Board of Education has provided leadership in its document, *Nurturing the Genius of Connecticut's Students, Connecticut's Comprehensive Plan for Education 1996-2000.* Expectation 2 under Goal 1: "High Expectations for Students", states:

All students will have access to and will complete a rigorous curriculum in core areas of study, including language arts, science, mathematics, social studies, the arts, foreign language, health and physical education, and technology.

It is time to set forth our mission in physical education as we begin the new millenium.■

## The Role Of Physical Education In Schools

Physical education and health education are part of a wellness formula. The prevention of future health problems should be a basis for what is taught and learned in physical education classes. To achieve this, physical edu-

cation must begin early in a child's life. The preschool child and early elementary child have an inherent desire to move. This desire, together with the development of good habits, should be nurtured into adulthood. Many workplaces are now adding opportunities for physical activity and other comprehensive health promotion programs for their employees. "Published research investigating the economics of physical activity has reported improved health and lower health care costs, absenteeism and disability associated with exercise and fitness programs." (Gettman, 1986)

Physical education, as a discipline, must have its content well defined and be designed to bring students to reach specific expectations. The direction for physical education in the 1990s was spearheaded by the National Association for Sport and Physical Education's (NASPE) 1992 definition of a physically educated person:

A physically educated person is one who:

- HAS learned the skills necessary to perform a variety of activities;
- DOES participate regularly in physical activity;
- IS physically fit;
- KNOWS the implications of and the benefits from involvement in physical activities; and
- VALUES physical activity and its contributions to a healthy lifestyle.

Physical education remains unique in its ability to challenge and develop all three domains of the learner: psychomotor, cognitive and affective. Psychomotor development in physical education occurs when students are given opportunities for the understanding of movement concepts and the building of competence and confidence to perform a variety of motor skills through developmentally appropriate activities. It involves the attainment of competency in fundamental movement patterns, selected sport skills and physical fitness activities.

Cognitive development involves knowledge, questioning, problem solving, reasoning, analyzing and communicating. The cognitive concepts related to physical education, such as knowledge of game rules, biomechanical principles, principles of training and physical fitness, are necessary applications for the performance of physical skills. Included in the cognitive domain is the accumulation of knowledge that leads to the ability to make informed decisions about one's physical well-being.

Affective development in physical education allows the learner to express an appreciation of self and others through experiences in movement participation. Developmentally appropriate activities are designed to allow students an opportunity to work together and develop social and cooperative skills. Appreciation of co-

velop social and cooperative skills. Appreciation of cooperation, fairness, following the rules of games, and the social and cultural values of dance are examples of the affective benefits derived from physical education. Affective development occurs when students have opportunities to experience and feel the satisfaction and joy that results from regular participation in physical activity.

Physical education, as a discipline, requires its own unique learning environment. All students must be actively engaged. A major goal in physical education is to have maximum participation for the longest possible time. Classrooms shall be exciting, movement-oriented places, where students explore and create. The environment created in quality physical education is inclusive and nonthreatening. It allows all students to participate and succeed regardless of ability. Physical education simultaneously develops independent learners and fosters the growth of cooperative learning skills. The skills taught in physical education, whether physical or social, all lend themselves to lifetime learning and are applicable outside the school setting. Students have a variety of opportunities for success in physical education.

Quality physical education teaches people to be efficient movers. They then apply this knowledge to different activities, e.g., basketball, tennis, swimming, dance, etc. Fitness needs to be related to movement. It should not become the sole focus of the physical education program, but a result of the activity and programs provided. Students need to understand how the level or degree of fitness can affect their performance in activities.

Physical education is a developmentally appropriate sequential program, teaching students how to understand and participate in vigorous physical activities that can assist in developing and maintaining physical fitness throughout their lifetime. Quality physical education provides opportunities for the development of movement skills and physical fitness. It focuses on acquiring and maintaining the health-related benefits of physical activity. Physical education provides cognitive content and learning experiences for children through a variety of activity areas. A quality program provides a wide range of developmentally appropriate activities from the following areas: team and individual activities, gymnastics, rhythm and dance, outdoor and challenge pursuits, aquatics, and cooperative activities. A balanced variety of these activities promotes each student's optimum physical, intellectual, emotional and social development, and promotes activities and sports which all students can enjoy and pursue both now and in the future.

Physical education has changed over the years, yet if we look back at the early formal beginnings of physical education in the United States, certain themes have continued to resurface and are present now. In the 1800s

physical education programs appeared in this country with their primary focus being on therapeutic exercise. At the turn of the century the concern became individual development. The Cardinal Principles of Education (1918), published by the Commission on the Reorganization of Secondary Education, helped to establish physical education as an offering in schools. The emphasis was on worthy use of leisure time. Fitness became the drive during the 1940s and 1950s, spearheaded by World War Il and a perceived need to promote physical well-being. Pedagogical research began in the 1940s and it also brought changes in how and what was being done in physical education. In 1964, educator Franklin Henry wrote an article in the Journal of Health and Physical Education describing physical education as an academic discipline. People tried to define a scientific body of knowledge for the discipline. In the 1960s, what had become a traditionally sport and fitness model was challenged by the British curricular model based on Rudolph Laban's movement theory. Laban analyzed movement in relation to worker efficiency on the assembly line and went on to develop theories for movement education and educational gymnastics. Movement education was used as a framework to structure content in games, dance and gymnastics.

Where does all of this history leave us and lead the discipline of physical education? We need to remember what has guided curriculum decisions throughout history.

Curriculum planning is based to a large extent on professional judgment and public policy. The focus of the curriculum has changed throughout history according to national and personal priorities related to social, economic and political concerns.

(Jewett et. al., 1995)

In the 1990s, the focus was not just on what is important for students to know and be able to do in physical education, but also on how that learning can best occur. As physical education frequently must fend for time in a very busy school day, educators have begun to recognize the interdisciplinary skills that are learned through physical activity. Physical education develops critical thinking skills, problem solving, communication and cooperation. Physical education in the 1990s included all of these skills and more through the increased use of cooperative activities and challenges, such as those found in adventure programs. Another transition has been the increased focus on the development of leisure and lifetime pursuits. Physical education trends continue toward teaching the basis for purposeful movement and encour-

own well-being now and in the future. What is learned ultimately becomes important in order to maintain a healthy lifestyle.

Programming in physical education needs to be developmentally appropriate to accommodate the variety of individual differences. Instruction must maximize the opportunities for learning and success for all students. Physical education needs to adopt a comprehensive approach to the development of a physically active lifestyle. Though school-based interventions are recognized as promising for both their immediate and longlasting potential impact, physical educators must look beyond the limits of their classrooms. If we are truly looking at a physically active lifestyle, then we need to constantly be aware not only of the school, but also family, community and business initiatives to increase physical activity. When students apply their skills and knowledge in these areas, we will be moving toward the development of a physically active society.

#### Purpose Of The Guide

The purpose of this *Guide to K-12 Program Development in Physical Education* is to create high-quality standards for all students in physical education and provide local school districts with direction for developing and delivering quality programs for the students of Connecticut. This guide is not intended to be a state syllabus or a curriculum outline, but to serve as a "framework" for the development and improvement of local programs. It is intended to be a resource that will assist physical educators, department chairpersons, curriculum supervisors, administrators, curriculum committees and members of boards of education as they develop programs. The development of curriculums is only one part of a quality program in physical education. This guide also discusses what is needed to provide and deliver a quality program,

how to develop curriculum at the local level, and the critical issues in physical education.

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